

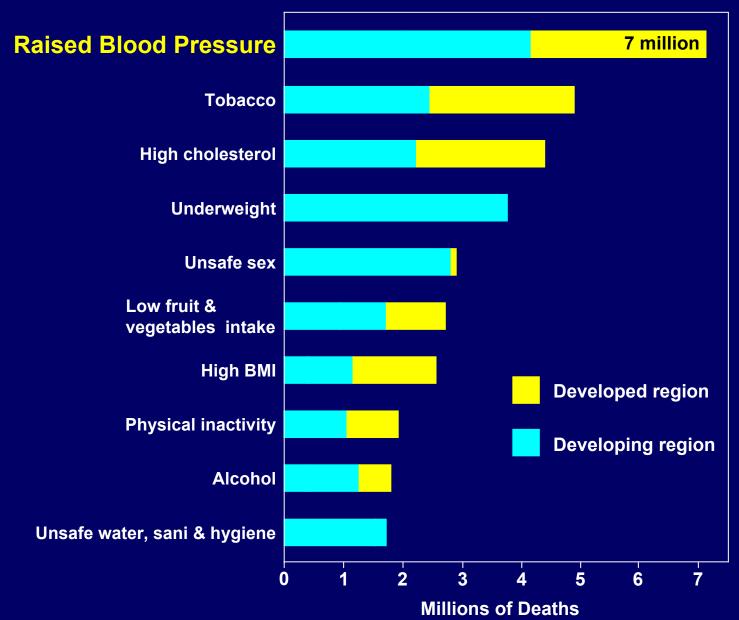
(Miami, Florida, 13–14 January 2009)

# Salt:

# From Evidence to Implementation in the UK

Graham A. MacGregor
St. George's Hospital
London, United Kingdom (UK)

## Major Underlying Factors Causing Death Worldwide



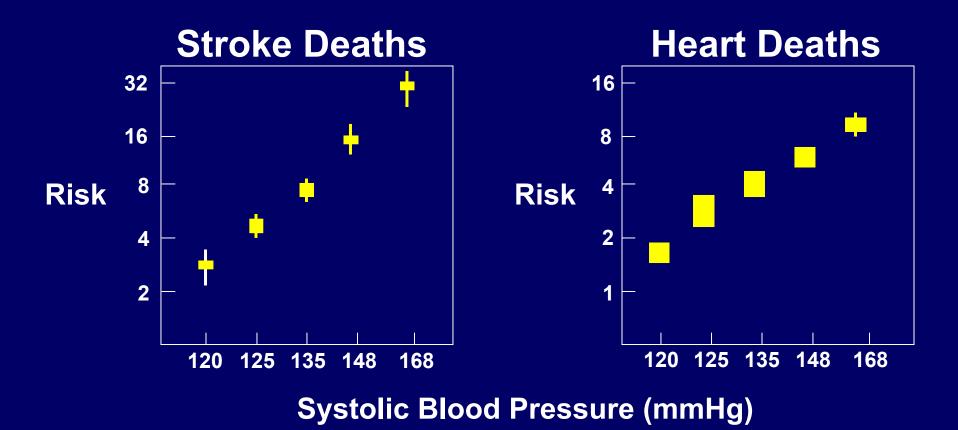
# **Major Modifiable Risk Factors**

- † Blood pressure
- ↑ Total & LDL cholesterol, ↓HDL
- Smoking
- Diabetes
- Lack of fruit and vegetables
- Lack of exercise
- Male pattern obesity

# **Unmodifiable**

- Age
- Genetics

# Systolic Blood Pressure and Risk of Death



The risk starts at systolic 115 mmHg (83% adults)

# What puts up population BP?

- Salt intake
- Lack of fruit and vegetables
- Weight
- Lack of exercise
- (Alcohol: excess consumption)

# Salt

Until 5,000 years ago, 0.1 grams of salt per day
Now 10 to 12 grams per day

### Why this big increase?

- (a) Magical property of preserving food
- (b) Cleans up tainted and/or unpalatable food

Deep-freeze refrigerator Therefore, now no need

But still eating 10 to 12 gram per day, courtesy of the food industry

80% (9.6 grams) of salt hidden in food

Restaurant

Canteen

Only 15% (1.8 grams) added by consumer

# **Evidence**

Epidemiology Over 50 population studies and Intersalt.

Migration e.g. Kenya.

Intervention Portuguese villages. Newborn babies.

Genetic All defects identified so far impair the ability of the kidney to excrete salt.

Mechanisms
 Plasma Na, corrected volume expansion

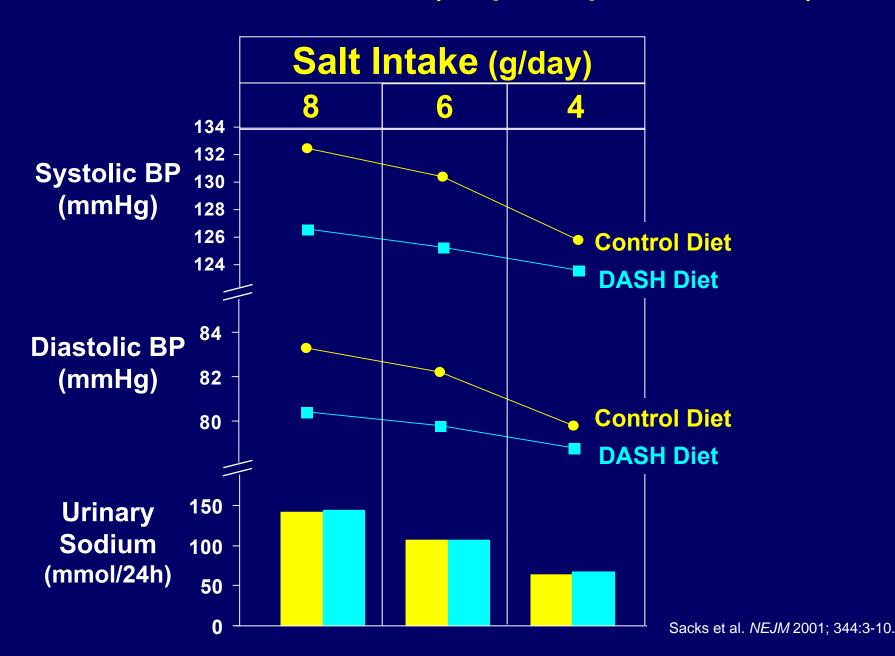
Animal All forms of hypertension are caused or aggravated by salt. Chimpanzees.

• Treatment Trials, Meta-analysis. Dose response.

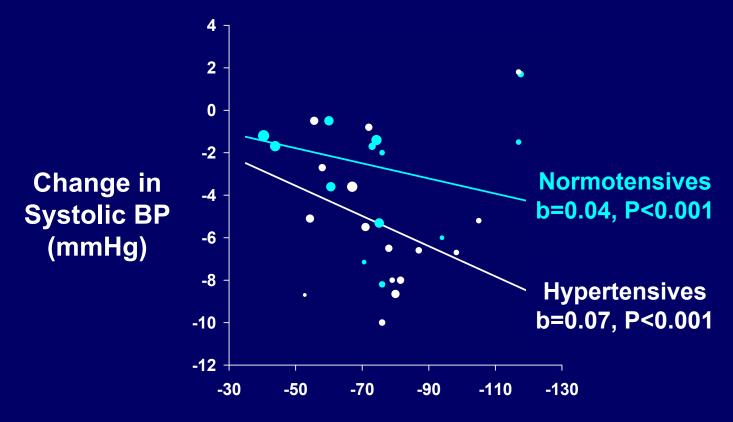
Mortality Studies Finland (24h UNa).

Outcome Trials TOHP, Taiwan (mineral salt: high K, low Na).

# **DASH-Sodium Trial** (All participants: N = 412)



# Dose Response: Meta-Analysis (1 month or longer)



**Change in Urinary Sodium (mmol/24h)** 

- ∴ A 6 g/day reduction in salt intake predicts a fall in SBP of:
  - **↓ 7 mmHg in Hypertensives** (p<0.001)
  - **↓ 4 mmHg in Normotensives** (p<0.01)

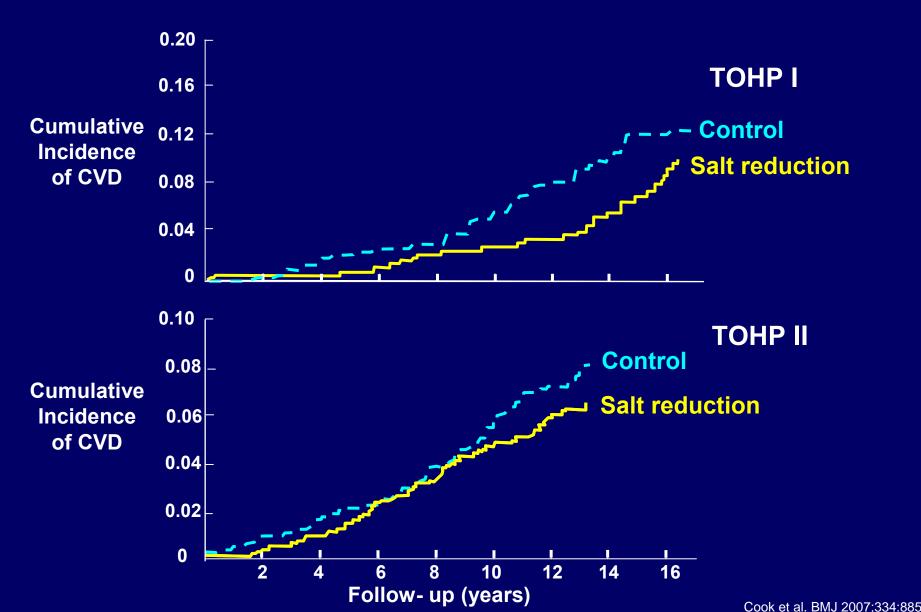


# **Salt intake 6g per day**↓ Stroke 24% ↓ CHD 18%

Feng J. He & GA. MacGregor Hypertension 2003;42:1093-99

Worldwide: 2.5 million (approx.) stroke & heart attack deaths prevented per year

# Outcome Trial ↓ 25% Salt intake → ↓ 25% CVD



# Salt: Other Harmful Effects

- Cancer of the stomach

  (↑ Salt (gastric irritant) ↑ H. pylori)
- Stroke
- LVH
- Heart failure, Idiopathic & cyclical oedema
- Kidney disease / Albuminuria
- Renal stones
- Bone demineralisation (osteoporosis)
   (↑ Salt ↑ Urinary calcium)
- Asthma
- Menières

# **Summary**

# Salt intake (10–12 g per day)

- Population BP, rise in BP with age, hypertension
- Other effects e.g. stomach cancer, stroke, LVH, kidney disease, osteoporosis etc

### Reduce salt intake

from 10–12 g per day to 5–6g per day

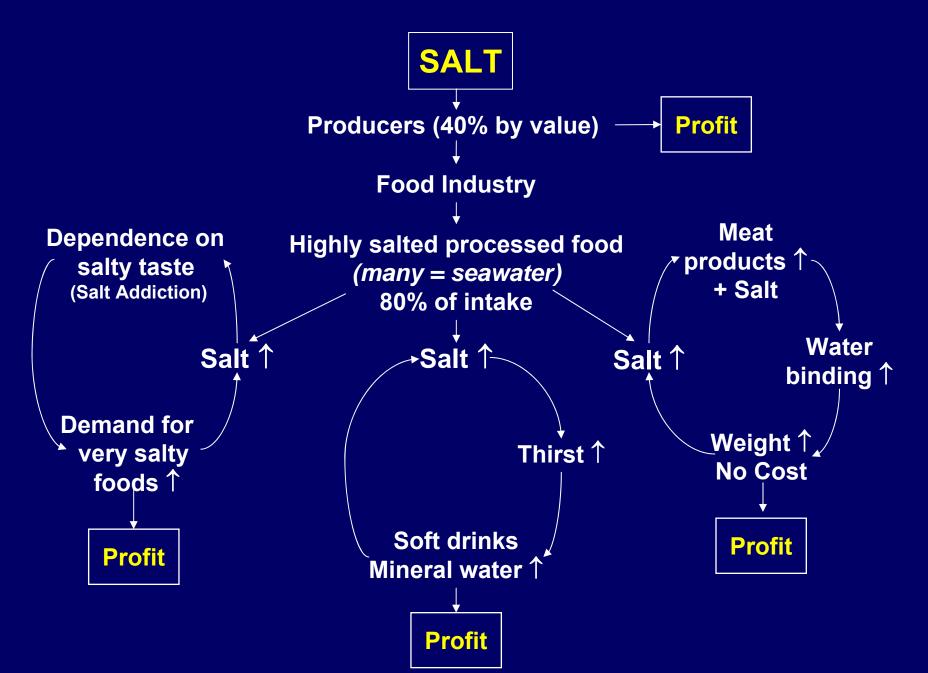
(WHO target: < 5g per day)

# Salt Intake

- 1. Hidden salt
- 2. Added salt (cooking, table)
- 3. Salt
  - a) Sauces/spices, e.g. soya
  - b) Dried products, e.g. salted fish

Strategy depends on major source of salt in each country

# Hidden Salt - Its Commercial Value



# **Seawater Comparison**

Pizza	60%	Medium Sliced White	50%
Chicken Curry	60%	Granary Loaf	60%
Processed Cheese	130%	Crumpets	80%
Bacon	200%	Plain Scones	80%
Sausages	100%	Digestive	60%
Smoked Fish	190%	Cream Crackers	60%
Sweet Pickle	170%	Cheddar Cheese	70%
Lasagne	40%	Stilton Cheese	90%
Shepherds' Pie	40%	Processed Cheese	130%
Frozen Prawns	80%	Branflakes	100%
Crisps	110%	Cornflakes	110%
Salad Cream	100%	Tomato Ketchup	110%
Savoury Biscuits	70%	Brown Sauce	100%



now with pure orange juice & strawberry flavour yogurt



The Golden Vale Cheese Co.







# **Action in the UK**

# Consensus Action on Salt & Health (CASH), 1996

- Members all experts on salt and BP
- Set up in 1996 in response to rejection of salt reduction recommendations by UK Dept. of Health

### **Aims**

- Change Department of Health policy
- Ensure Food Standards Agency adopted salt reduction & labeling
- Media publicity to the public and food industry
- Persuade retailers and food company's to reduce salt added to food

# Food Standards Agency (UK)

- Set up to deal with BSE New variant CJD
- What else? Salt reduction
  - Gradual reduction in salt added to foods 15%–25% by whole food industry. Repeat annually or biannually.
  - Processed foods divided into 80 categories with targets set to be reached by the food industry in 2010 and 2012.
  - Aim: To reduce salt intake to less than 6g per day (adults) by 2012
  - Labelling-signpost +salt per serving
  - 24-hour urinary sodium has been reduced from the start of the program in 2003 to 2006 from 9.5g per 24 hours to 8.6g per 24h

# **UK Strategy for Reducing Salt**

### **Current salt intake / day**

### Reduction needed

Table / Cooking (15%)	1.8 g	50% reduction	0.9 g
Natural (5%)	0.6 g	No reduction	0.6 g
Food industry (80%)	9.6 g	53% reduction	4.5 g

Total 12 g

Target 6 g

Food industry needs to reduce salt content of ALL foods where salt has been added by 53% over the next 5 years

**UK salt intake 2003 9.5 g/day** → **2006 8.6 g/day** 

By EMMA SHRIMSLEY

### IT'S one of the world's deadliest white powders - not cocaine, but salt.

It's responsible for 35,000 deaths in the UK EVERY year yet we sprinkle and scoff it at every meal. It's also hidden in thousands of everyday foods

Most of us are eating AT LEAST one-and-a-half times more salt than we should. Eating too much salt is dangerous because it makes the body retain more water. This pushes up blood pressure and increases the level of fluids cir-

and increases the level of fluids circulating through the brain, heart
and other organs, which increases
the state of th

much salt they consume in a year -and the results were alarming.
Only one of the four was within their recommended intake. The oth-

their recommended intake. Tes were eating up to 85 per cent more salt than they should. The recommended daily maximum for adults and children aged 11 or more is 6g. Much lower levels apply to younger child-

The majority of the population con-sume dangerously high amounts of salt and the Government have laid the blame firmly at the feet of food manufacturers because 75 per cent of our salt intake comes fast foods.
For this reason

Health Minister Mel-anic Johnson has called on firms to reduce the salt in their products

She wants a 40 per cent reduction in beefburgers, in beefburgers,
20-40 per cent in
bread and cereals,
43 per cent in sausages, 38 per cent in
ready meals and 33 per cent
in baked beans within four years.
Most of us don't realise how
much saft we consume each day as
ourselves and our children.
The Food And Drinks Federation
say they have been making efforts
ave they have been making efforts

say they have been making efforts to reduce salt in processed foods and accuse the Government of being unrealistic in setting specific

being unrealistic in setting specific targets and timescales.

Spokeswoman Christine Fisk says: "What we can achieve is dependent on consumer acceptance. If they don't huy the products because they don't huy the products because they all to them, it is pointless." But Graham MacGregor, chairman of CASH — Consensus Action on Salt and Health — and professor of cardiovascular medicine at Salt and Health — and professor of cardiovascular medicine as "Studies on the salt taste receptors have shown that reductions of at least 15 per cent in the salt concentration." nave snown that reductions of at least 15 per cent in the salt concen-tration can be made without anyone detecting a difference in flavour. This would mean the salt content of a boul of

This would mean the salt content of a bowl of cereal that currently contains ig of salt could be reduced immediately to 0.9g, a ten per cent reduction no one would notice.

The Co-op are proving it can be done. They have successful to the done. They have successful to the beautiful to the done. They have reduced by up to half the levels of salt in packet soups, some sauces, quiches, pizzas and sandwiches. Birds Eye are another success start The done with the devels of the done with the d









# **SALT...deadly white powder** wipes out 35.

### **ROXANNA MODIRI, 28**

SINGLE mum Roxanna is an assistant office manager from Sutton Coldfield. West Midlands. Son Louis is seven. TYPICAL DAY'S FOOD:

BREAKFAST: One Weetabix and milk or bowl of Asda

LUNCH: Tinned pasta with tomato sauce from "good for you" range or Heinz Big soup chunky vegetable DINNER IN: Ready-made cheese-filled pasta with tomato

sauce or lasagne DINNER OUT: Cheese-and-vegetable-filled pastry with chips and salad or garlic bread and pasta with sauce. SNACKS: A bar of chocolate or a piece of coffee cake

once or twice a week. ANNUAL SALT: 2,555g. Recommended max: 2,195g.

ROXANNA SAYS: "My son has Attention Deficit Hyperactivity Disorder which is made worse by additives so all of his food is home-made. But because I am vegetarian I don't generally eat the same things as him. So between working and caring for him I don't really have time to cook for me."

PENELOPE GILBERT, nutritionist at CASH (Consensus Action on Salt and Health), says: "The cereals are by no means the worst offenders but she could try lower salt versions such as Shredded Wheat or muesii.

"Tinned soups and pasta, ready meals such as lasagne

and pastry products are all high in sait and should only be eaten occasionally. If she doesn't have time to make them from scratch she should look for meals that contain less than 0.1g of sodium per ANNUAL RECOMMENDED MAX

2,555g Roxanna's intake 2,195g

### **STEVE BUTTERS, 24**

STEVE is single. He is a personal trainer from Chorley,

TYPICAL DAY'S FOOD

BREAKFAST: Porridge with banana and slice of wholemeal bread and jam or two poached eggs on two slices of toast,

MID-MORNING SNACK: Fruit, unsalted nuts and vogurt, LUNCH: Two rounds of tuna sandwiches, (no mayonnaise) or baked potato with baked beans and bacon, fruit and

MID-AFTERNOON SNACK: Home-made chicken and pasta

DINNER: Chilli con carne with rice using a jar of cooking sauce or tuna and vegetable casserole with home-made low fat cheese sauce.

EVENING: Protein shake.

ANNUAL SALT: 2,062g, below recommended maximum. STEVE SAYS: "Being a personal trainer I am very aware of

"Most important to me is that food is low-fat and has a low GI (Glycaemic Index).

"But I also watch my sugar and salt. Apart from that I just aim for a balanced diet."

PENELOPE SAYS: "Steve is eating a sensible, well-balanced diet.

"As most of his meals are home-made he is consuming less salt than if he bought a lot of processed foods.

To reduce his salt intake further Steve could make his own "He is currently having up to four slices a day, which accounts for 2g of

2,195g ANNUAL RECOMMENDED MAX

intake

### **GINA HARRIS, 35**

MARRIED Gina is an eye specialist from North London. She has two children, Zoe, two and Ben, 13 weeks. TYPICAL DAY'S FOOD:

BREAKFAST: Bowl of frosted flakes, semi-skimmed milk, slice toast with salted butter, peanut butter or jam LUNCH: Sandwich of chicken-and-mayonnaise salad or smoked salmon or shop-bought pasta salad with feta cheese and roast vegetables, fruit and/or yogurt. DINNER IN: Pasta and shop-bought tomato sauce with

added meat and vegetables and parmesan or ready-made lasagne and salad with dressing. DINNER OUT: Pizza or beefburger with chips and salad with dressing, cheesecake for dessert.

SNACKS: Fruit, crisps, cereal bars and flaplacks. ANNUAL SALT: 4,105g.

GINA SAYS: "With two young children I tend to eat food I can prepare quickly for lunch and once the kids are in bed it's often too late to start a meal from scratch.

"If I feel the need for a sugary snack I eat flapjacks and cereal bars because I feel it's healthier than chocolate." PENELOPE SAYS: "She is consuming a lot of hidden salt from cereals, sandwiches and ready meals. She could choose a

low-salt cereal like Shredded Wheat, use unsalted butter, 4.105g Gina's restrict the smoked salmon intake she eats and look for alternative fillings like egg in sandwiches. She should try using tinned tomatoes as a base for a sauce and try lower salt pizzas."

2,1950

ANNUAL RECOMMENDED MAX

### **JAMIE LUMSDEN, 9**

SCHOOLBOY Jamie is from Helensburgh, Arayle. TYPICAL DAY'S FOOD:

BREAKFAST: Bowl of cornflakes or chocolate-covered cereal, one or two slices of toast with lightly salted butter. LUNCH AT SCHOOL: Sausage roll and beans or pizza.

LUNCH AT HOME: Filled baguette or chicken nuggets and chips and fruit for dessert

DINNER: Steak pie and vegetables; roast chicken and bread sauce: or macaroni cheese ready meal with two

slices of bread, then yogurt or fruit for dessert. SNACKS: Salt and vinegar crisps, Toffee Crisp, Fruit Winders, fruit

ANNUAL SALT: 2,372g.

HIS MUM ALISON SAYS: "I try to make sure he gets a balanced diet. Jamie is very good at eating fruit and vegetables and he does not have fizzy drinks.

"We don't add salt to the food we cook at home but have no control over school dinners or shop-bought meals. PENELOPE SAYS: "Jamie is eating around 1.5g of salt

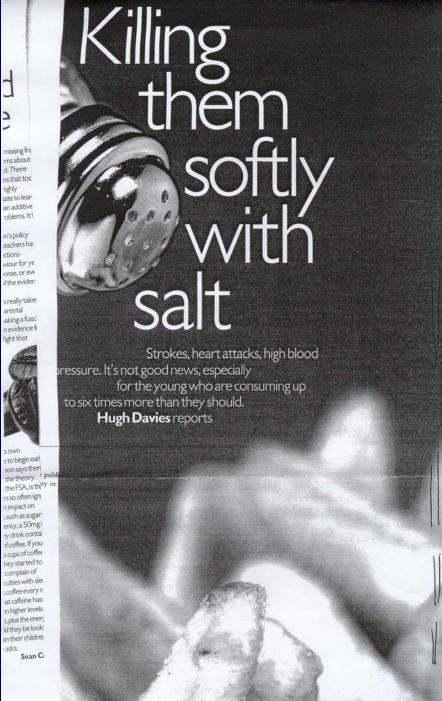
above the recommended amount per day. "Some days he is eating comflakes for breakfast which are

one of the saltiest cereals available. I suggest he tries Shredded Wheat or porridge-type cereals. "Jamie should limit the amount of baked beans, chips and

pizzas he eats at school as these are 2,372g Jamie's all pretty high in salt. \*For dinner, the amount of salt

could be reduced if meals were cooked from scratch. Ready meals such as steak pie contain a lot of added salt."

1,825g ANNUAL RECOMMENDED MAX



eed children
you condem
blood press
That's the
from a gro
specialists or
paigning for
ness about the harmf
high-salt diet.

Salt causes the body fluid, and is thought to volume over time, the hypertension. According sus Action on Salt and scientific evidence sugults should consume in grams, or a teaspoond day (our bodies only in grams). For children ag the target intake droy while children aged on have no more than 2 should have no added 4.

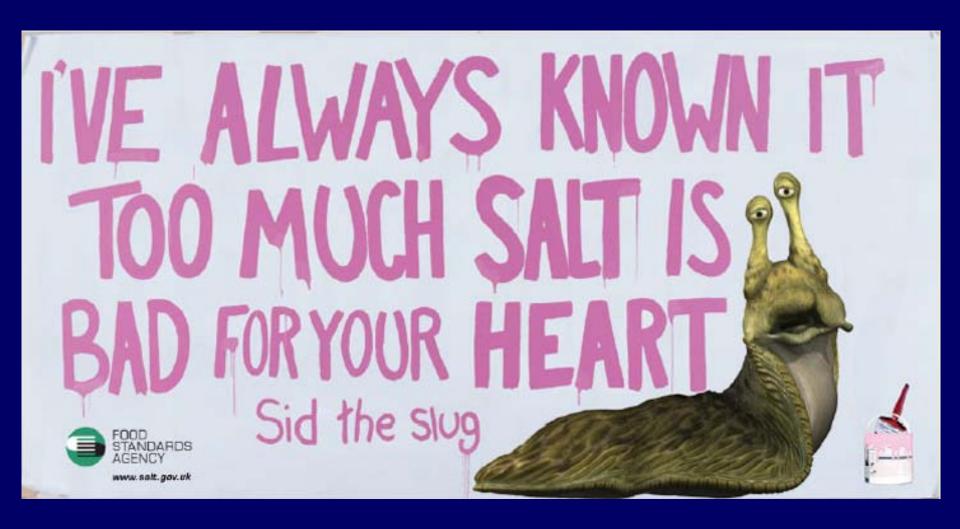
However, recent shown not only that a suming between 10 ar salt a day — twice the maximum and three ti need — but that childre even less, are actually 4 same amount. This is due to their high intak salty snacks and even leads, some of which ar Atlantic sea water.

According to Grahar professor of cardio-vase at St George's Hospit don, and chair of both Blood Pressure Associa intake at an early age is serious consequences in

"If you feed salt to you tend to get irrever that make it much me will develop higher ble he says. "If we didn't ha until about 5,000 years us would have high bl Which is why we aim i down in children from are born."

A big stumbling block sor MacGregor, has a industry (75 per cent of a comes from processed ing bread). He doesn't when laying the blame squarely at its door.

"The food industry is the way it markets rub to children," he says." etely useless foods are They then add lots of sand spend huge amoun



www.salt.gov.uk

& your brain & kidneys!

# World Action on Salt & Health (WASH)

>300 members worldwide, >70 countries

Target: 

√ Salt intake worldwide to 5g/d (WHO)

### Worldwide

- Globally Monitor and highlight foods high in salt.
- Implement salt reduction plan worldwide.
- Clear labeling system (traffic light).

# Individual Countries

- Facilitate individual countries to set up expert groups on salt (similar to CASH), e.g. Canada, Australia.
- Convince government and health dept. to adopt scientific evidence as in Finland, UK and ensure action by food industry.
- Public health campaign to reduce salt consumption at home.

http://www.worldactiononsalt.com

# Summary

 Salt intake → biggest improvement in public health since clean water and drains (19th Century)